PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000							Application or Docket Number							
									29	690	6,56	6	. :	
CLAIMS AS FILED - PART (Column 1) (Column 2)						SMALL ENTITY								
TOTAL CLAIMS							RAT		FEE	OH 7			Y.	
FOR		NUMB	NUMBER FILED		NUMBER EXTRA		BASIC	- -	55.00	OR	BASIC F		_	
TOTAL CHARGEABLE CLAIMS		20	20 minus 20=		• -		X\$ 9	+		1 ```		7,710.	<u>.</u>	
NDEPENDENT CLAIMS		6	6 minus 3 =		. 3		X40			OR	X\$18-		_	
ULTIPLE DEPI	ENDENT CLAIM	PRESENT	***************************************			A405		4		OR	X80=	240	2	
If the difference in column 1 is less than zero				Trio		+135=			• .	ÓR	+270=			
	CLAIMS AS		-		COURSE 2		TOTA			OR	TOTAL	950	٠6	
<u> </u>	·· (Column 1)				(Column 3)	٠.	SMAL	L FAC	ПΥ	OB.	OTHE	R THAN		
	CLAIMS REMAINING		HIGH NUMB	51	PRESENT	ſ			001-		SHIPLE	ADO		
	AFTER AMENDMENT		PREVIO PAID F		EXTRA	1	RATE		DNAL		RATE	TION	4	
Total	20	- Minus · ·	. 2	٥		+	X3 9-	44.9			X 18.			
Independent	· 6	Minus	··· b		B	\vdash	X40=	+	_			Service Control	7	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						┢	A409	╁╌		OR	X80=	3 3 XX	33	
						Ľ	135	Ŀ		OR	+270=			
25.05	(Column 1)		(Column 2) (Column 3)				DIT. FEI			OR,	DOIT FEE	200		
	ICLAIMS REMAINING		RIGRE	ST -	(Column 3)	_		1 45	01		1/4			
	AFTER AMENDMENT		NUMBE PREVIOL PAID FO	ISLY	PRESENT EXTRA	F	RATE	TIO	NAL		RATE	ADO TIONA		
Total	. 20	Minus		2.0			-	 [E	-	, p 2	PEE	7	
Independent	. 6	Minus	•••	6		扌	\$ 9=	┞	_	ÖB _	X\$18≅	27		
FIRST PRESE	NTATION OF MIL	ILTIPLE DE	PENDENT C	LAIM		Ľ	40=	L		ĎΑ.	X80-		: 0	
	•	•				1	135=		c	DR .	+270=		:	
•		,					TOTAL T. FEE			AC	YOTAL OIT, FEE		1	
	(Cotumn 1) CLAIMS		(Column		(Column 3)							•	7	
	REMAINING AFTER AMENDMENT		NUMBEI PREVIOUS PAID FOI	R SLY	PRESENT EXTRA	R/	ATE	ADD	AL		RATE	ADDI- TIONAL	1	
	•.	Minus	••		•	·ye	9=	FEI	7	 		FEE	1	
ndependent		Minus	***			_	_	-	- °	``├-	C\$18=		1	
PRESE	NTATION OF MU	LTIPLE DEF	PENDENT CL	AIM		**	0= -		_ 0	RL	×80=		1	
he entry in colum	n 1 is less than the	entry in co lu	mn 2. welle Yr	in cab	m 3		35=		Ö	٠ ١	270-			
and Localizated Williams	ber Previously Paid ber Previously Paid	I FAP IN THIS	2 CDACC 14 444		.	T	OYAL FEE			_ —	TOTAL		1.	

FORM PTO-475 (Rev. 8/00)

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